## United States Of America

## Bepartment of Transportation - Federal Abiation Administration

## Supplemental Type Certificate

Number SA3557SW

This Certificate issued to

AAR Airframe and Accessories Group, Inc. an Illinois Corporation AAR Aircraft Services-Oklahoma an Oklahoma Corporation 6611 South Meridian Oklahoma City, OK 73159-1104

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 23 of the Federal Aviation Regulations.

Original Product Type Certificate Number:

Fairchild

Model: SA227-AC

Description of Type Design Change:

- Installation of freon air conditioning system in accordance with AAR Dwg List #850813 dtd 8/13/85 & EO 85-9-200 dtd 12/10/85 or later FAA approved
- Revised installation dwgs for freon air conditioning system. Replaced AAR DwgList #850813 dtd 8/13/85 with Dwg List 06L003 dtd 7/10/89 on SA227AC aircraft only.

## Limitations and Conditions:

FAA approved Airplane Flight Manual Supplement dtd 12/23/85 is required. Compatibility of this modification with other previously approved modifications must be determined by the installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application October 10, 1985

Date reissued: 10/28/98; 12/13/00

Date of issuance: December 23, 1985

Date amended: July 10, 1989 Rev. 1

By direction of the Administrator

S. Frances Cox

Manager, Special Certification Office,

Southwest Region

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional O the transfer of this Supplemental Type Certificate.	ffice of
The FAA will reissue the certificate in the name of the transferee and forward it to him.	
TRANSFER ENDORSEMENT	
Transfer the ownership of Supplemental Type Certificate Number	
to (Name of transferee)	
(Address of Iransferee)	
(City, State, and ZIP code)	
from (Name of grantor) (Print or type)	
(Address of grantor)  (Number and street;	
(City, State, and ZIP code)	
Extent of Authority (if licensing agreement):	
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Date of Transfer:	
Signature of grantor (In ink):	